VIRGINIA DEPARTMENT OF HEALTH (VDH) OFFICE OF DRINKING WATER (ODW) FINANCIAL AND CONSTRUCTION ASSISTANCE PROGRAMS (FCAP)

RETURN TO:

Virginia Department of Health Office of Drinking Water 109 Governor Street, 6th Floor Richmond, VA 23219 (Voice: 804-864-7501) (FAX: 804-864-7521)

SET-ASIDE SUGGESTIONS FORM

Also available at: $\underline{http://www.vdh.virginia.gov/odw/financial/dwfundingprogramdetails.htm}$

SECTION A - ORGANIZATIONAL DATA

1.	Organization Name			
	a. Name of Respondent			
	b. Respondent Address:			
	c. Contact Person: d. Telephone Number:		Email:	
	-		Location (City/County	
2.	Waterworks type (if applicable):			
	Publically-owned community Investor-owned community Nonprofit noncommunity		System Name	
	Administrative Officer or Author	orized Representative of O	rganization:	
	NAME and TITLE:			
SIGNATURE		D	ATE:	
Su	bmittal of suggestion(s) are to assist th	e Commonwealth in deter	mining the extent of interest in the various set-a	sides.
SE	CTION B – SET-ASIDE SUGGESTIO	ONS (Use separate page if 1	necessary)	
Su	ggested activities or comments for set-as	ides and related funds sugge	sted (\$)	
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